PLEASANT ACRES W8741 COUNTY B

NEW LISBON 53950 Phone: (608) 562-3667 Ownership: County Operated from 1/1 To 12/31 Days of Operation: 366 Highest Level License: Skilled Operate in Conjunction with Hospital? No Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/00): 60 Title 18 (Medicare) Certified? Yes Total Licensed Bed Capacity (12/31/00): 60 Average Daily Census: **56** Number of Residents on 12/31/00: **56**

Services Provided to Non-Residents	Age, Sex, and Primary Diagn	Length of Stay (12/31/00	%				
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year	23. 2
Supp. Home Care-Personal Care	No					1 - 4 Years	41. 1
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	3. 6	More Than 4 Years	35. 7
Day Services	No	Mental Illness (Org./Psy)	19.6	65 - 74	10. 7		
Respite Care	Yes	Mental Illness (Other)	1.8	75 - 84	28. 6	ĺ	100. 0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	46. 4	*************	******
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	7. 1	95 & 0ver	10. 7	Full-Time Equivale	nt
Congregate Meals	No	Cancer	0.0			Nursing Staff per 100 R	esi dents
Home Delivered Meals	No	Fractures	1.8		100.0	(12/31/00)	
Other Meals	No	Cardi ovascul ar	16. 1	65 & 0ver	96. 4		
Transportation	No	Cerebrovascul ar	10. 7			RNs	16. 2
Referral Service	No	Di abetes	1.8	Sex	%	LPNs	2. 4
Other Services	Yes	Respi ratory	5. 4			Nursing Assistants	
Provi de Day Programming for		Other Medical Conditions	35. 7	Male	21. 4	Aides & Orderlies	43. 9
Mentally Ill	No			Female	78. 6	İ	
Provide Day Programming for			100.0			İ	
Developmentally Disabled	No				100. 0	I	
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Method of Reimbursement

		Medic:	are		Medic	ai d											
			(Title 19) Other				er	Private Pay				Manage	Percent				
			Per Die	em		Per Die	m		Per Die	m		Per Di er	n]	Per Diem	Total	Of All
Level of Care	No.	%	Rate	No.	%	Rate	No.	%	Rate	No	. %	Rate	No.	%	Rate	No.	Resi dents
Int. Skilled Care	0	0. 0	\$0. 00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Skilled Care	0	0. 0	\$0.00	45	93. 8	\$97. 57	0	0. 0	\$0.00	8	100. 0	\$116.00	0	0. 0	\$0.00	53	94.6%
Intermediate				3	6. 3	\$78.89	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	3	5. 4%
Limited Care				0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Personal Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Residential Care				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0. 0%
Dev. Di sabl ed				0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Traumatic Brain In	j. 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Ventilator-Depende	nt 0	0.0	\$0.00	0	0. 0	\$0.00	0	0. 0	\$0.00	0	0.0	\$0.00	0	0. 0	\$0.00	0	0.0%
Total	0	0. 0		48 1	100. 0		0	0.0		8	100.0		0	0. 0		56	100.0%

PLEASANT ACRES

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Admissions, Discharges, and		Percent Distribution	of Residents'	Condi t	ions, Services,	and Activities as of 12/	31/00
Deaths During Reporting Period							
				9	% Needi ng		Total
Percent Admissions from:		Activities of	%	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	12. 1	Daily Living (ADL)	Independent	0ne	Or Two Staff	Dependent	Resi dents
Private Home/With Home Health	0.0	Bathi ng	0. 0		71. 4	28. 6	56
Other Nursing Homes	0.0	Dressi ng	3. 6		83. 9	12. 5	56
Acute Care Hospitals	81.8	Transferring	19. 6		62. 5	17. 9	56
Psych. HospMR/DD Facilities	0.0	Toilet Use	12. 5		69. 6	17. 9	56
Rehabilitation Hospitals	0.0	Eating	46. 4		48. 2	5. 4	56
Other Locations	6.1	***************	*******	*****	******	*********	******
Total Number of Admissions	33	Continence		%	Special Treat	ments	%
Percent Discharges To:		Indwelling Or Externa	l Catheter	5.4	Receiving R	espi ratory Care	8. 9
Private Home/No Home Health	36.4	Occ/Freq. Incontinent	of Bladder	50 . 0	Recei vi ng T	racheostomy Care	1. 8
Private Home/With Home Health	21.2	Occ/Freq. Incontinent	of Bowel	25 . 0	Receiving S	ucti oni ng	1.8
Other Nursing Homes	6.1				Receiving 0	stomy Care	3. 6
Acute Care Hospitals	6.1	Mobility			Recei vi ng T	ube Feeding	0. 0
Psych. HospMR/DD Facilities	0.0	Physically Restrained	l	16. 1	Receiving M	echanically Altered Diets	37. 5
Rehabilitation Hospitals	0.0						
Other Locations	0.0	Skin Care			Other Residen	t Characteristics	
Deaths	30.3	With Pressure Sores		5.4	Have Advanc	e Directives	82. 1
Total Number of Discharges		With Rashes		7. 1	Medi cati ons		
(Including Deaths)	33				Receiving P	sychoactive Drugs	44. 6

	Ownershi p:		ershi p:	Bed	Si ze:	Li c	ensure:		
	Thi s	Gov	ernment	50-	- 99	Ski l	lled	Al l	
	Facility	Peer	Group	Peer	Peer Group		Group	Facilities	
	%	%	Ratio	%	Ratio	%	Rati o	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	93. 3	87. 0	1. 07	85. 4	1.09	84. 1	1. 11	84. 5	1. 10
Current Residents from In-County	91. 1	75.8	1. 20	72. 9	1. 25	76. 2	1. 20	77. 5	1. 18
Admissions from In-County, Still Residing	33. 3	28. 9	1. 15	21.3	1. 56	22. 2	1. 50	21.5	1. 55
Admissions/Average Daily Census	58. 9	81. 9	0. 72	101.3	0. 58	112. 3	0. 52	124. 3	0.47
Discharges/Average Daily Census	58 . 9	83. 2	0. 71	101.3	0. 58	112. 8	0. 52	126. 1	0.47
Discharges To Private Residence/Average Daily Census	33. 9	32. 1	1.06	37. 6	0. 90	44. 1	0. 77	49. 9	0. 68
Residents Receiving Skilled Care	94. 6	88. 8	1. 07	89. 6	1.06	89. 6	1.06	83. 3	1. 14
Residents Aged 65 and Older	96. 4	89. 7	1.07	93. 4	1.03	94. 3	1.02	87. 7	1. 10
Title 19 (Medicaid) Funded Residents	85. 7	69. 4	1. 24	69. 0	1. 24	70. 1	1. 22	69. 0	1. 24
Private Pay Funded Residents	14. 3	20. 1	0.71	23. 2	0. 62	21. 4	0. 67	22. 6	0.63
Developmentally Disabled Residents	0. 0	0.8	0. 00	0.9	0.00	0. 9	0.00	7. 6	0.00
Mentally Ill Residents	21.4	47. 5	0. 45	41.5	0. 52	39. 6	0. 54	33. 3	0.64
General Medical Service Residents	35. 7	15. 2	2. 35	15. 4	2. 32	17. 0	2. 10	18. 4	1.94
Impaired ADL (Mean)	50. 7	50. 7	1.00	47.7	1.06	48. 2	1.05	49. 4	1.03
Psychological Problems	44. 6	58 . 0	0.77	51.3	0.87	50.8	0. 88	50. 1	0.89
Nursing Care Required (Mean)	8. 3	6. 9	1. 19	6. 9	1. 19	6. 7	1. 23	7. 2	1. 15